Application No.(s): (county-assigned application number(s), to be entered by County Staff)
SPECIAL PERMIT/VARIANCE AFFIDAVIT
DATE: 05/20/14 (enter date affidavit is notarized)
I, Maritzu T. Lone 2-Bri 200a, do hereby state that I am an (enter name of applicant or authorized agent)
(check one) [17] applicant [ ] applicant's authorized agent listed in Par. 1(a) below
and that, to the best of my knowledge and belief, the following is true:
The following constitutes a listing of the names and addresses of all APPLICANTS, TITLE OWNERS, CONTRACT PURCHASERS, and LESSEES of the land described in the application,* and, if any of the foregoing is a TRUSTEE,** each BENEFICIARY of such trust, and all ATTORNEYS and REAL ESTATE BROKERS, and all AGENTS who have acted on behalf of any of the foregoing with respect to tapplication:  (NOTE: All relationships to the application listed above in BOLD print must be disclosed. Multiple relationships may be listed together, e.g., Attorney/Agent, Contract Purchaser/Lessee, Applicant/Title Owner, etc. For a multiparcel application, list the Tax Map Number(s) of the parcel(s) for each owner(s) in the Relationship column.)
NAME ADDRESS RELATIONSHIP(S)  (enter first name, middle initial, and (enter number, street, city, state, and zip code) (enter applicable relationships last name)  Haritza T. Lopez-Brizvela  Fairax, Vn 22032  Owner Applicate  Fairax, Vn 22032
ABL DAY CARE, LLC
(check if applicable) [ ] There are more relationships to be listed and Par. 1(a) is continued on a "Special Permit/Variance Attachment to Par. 1(a)" form.  * In the case of a condominium, the title owner, contract purchaser, or lessee of 10% or more of the units in the condominium List as follows: Name of trustee, Trustee for (name of trust, if applicable), for the benefit of: (state

CARBO

name of each beneficiary).

FORM SP/VC-1 Updated (7/1/06)

Application No.(s		
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	SPECIAL PERMIT/VARIANCE AFFIDAVIT	Page Two
	DATE: 05/20/14 (enter date affidavit is notarized)	
•	(enter date affidavit is notarized)	·
		24444
INVESTMENT TRUSTS he		<b>ATE</b>
	CORPORATION INFORMATION	
NAME & ADDRESS OF O	the state of state of state, and zip of	ode) 24, <i>VA ZZ</i> 037
[ ] There are 10 c [ ] There are more any class of st [ ] There are more	ORATION: (check one statement) or less shareholders, and all of the shareholders are listed below.  e than 10 shareholders, and all of the shareholders owning 10% or more of ock issued by said corporation are listed below.  e than 10 shareholders, but no shareholder owns 10% or more of any class by said corporation, and no shareholders are listed below.	

NAMES OF SHAREHOLDERS: (enter first name, middle initial, and last name)

Maritza J. Lopez-Brizvela

(check if applicable) [ ] There is more corporation information and Par. 1(b) is continued on a "Special Permit/Variance Attachment 1(b)" form.

\*\*\* All listings which include partnerships, corporations, or trusts, to include the names of beneficiaries, must be broken down successively intil (a) only individual persons are listed or (b) the listing for a corporation having more than 10 shareholders has no shareholder owning 10% or more of any class of stock. In the case of an APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE\* of the nartners, of its shareholders as required above, and of beneficiaries of any trusts. Such successive breakdown must also include treakdowns of any partnership, corporation, or trust owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT OWNER, CONTRACT OWNER, or LESSEE\* of the land. Limited liability companies and real estate investment trusts and their equivalents are treated as or opporations, with members being deemed the equivalent of shareholders; managing members shall also be listed. Use footnote numbers of designate partnerships or corporations, which have further listings on an attachment page, and reference the same footnote numbers on the ttachment page.

Application No.(s):		
(county-assigned application number(s), to be entered by County Staff)		
SPECIAL PERMIT/VARIANCE AFFIDAVIT	F	Page Thre
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1(c). The following constitutes a listing*** of all of the PARTNERS, both GENERAL and LII partnership disclosed in this affidavit:	MITED, in any	
PARTNERSHIP INFORMATION		
PARTNERSHIP NAME & ADDRESS: (enter complete name, number, street, city, state, and zip c	ode)	
		ļ
(check if applicable) [ ] The above-listed partnership has <u>no limited partners</u> .		
NAMES AND TITLE OF THE PARTNERS (enter first name, middle initial, last name, and title	e, e.g. General I	Partner,
Limited Partner, or General and Limited Partner)		
	•	•
P / A		
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(check if applicable) [ ] There is more partnership information and Par. 1(c) is continued on a "Special Continued on a "Speci	cial	
Permit/Variance Attachment to Par. 1(c)" form.	•	
*** All listings which include partnerships, corporations, or trusts, to include the names of beneficiaries, must be		
until: (a) only individual persons are listed or (b) the listing for a corporation having more than 10 shareholders had 10% or more of any class of stock. In the case of an APPLICANT, TITLE OWNER, CONTRACT PURCHASE		
land that is a partnership, corporation, or trust, such successive breakdown must include a listing and further b	breakdown of all o	
partners, of its shareholders as required above, and of beneficiaries of any trusts. Such successive breakdown n breakdowns of any partnership, corporation, or trust owning 10% or more of the APPLICANT, TITLE OWNE.		
PURCHASER, or LESSEE* of the land. Limited liability companies and real estate investment trusts and their	r equivalents are t	
corporations, with members being deemed the equivalent of shareholders; managing members shall also be list to designate partnerships or corporations, which have further listings on an attachment page, and reference the same	ed. Use footnote no footnote no footnote number	numbers
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attachment page.

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					(enter date a	ffidavit is n	otarized)	· ; , (\$1 , 2 - 2 )	in in the second se		
							=			124444	L
1(d).	One	of the following	ng boxes <u>r</u>	nust be c	hecked:			,			•
•	[]	all other indi-	viduals wi	10 own in	Paragraphs 1( the aggregate ( ICANT, TITL	directly and	l as a shar	eholder.	partner.	and benefit	ciary of a
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	W.	Other than the (directly and a OWNER, CO	is a sharen	iolder, pai	rtner, and bene	ficiary of a t	rust) 10%	or more	of the A	APPLICAN	T, TITLE
2.	ner ii	no member of t nmediate house in a corporatio	chold own	s or has a	ny financial int	erest in the	subject lar	nd either	r individa	ally by or	r of his or vnership of
	EXC	EPT AS FOLI	LOWS: (	NOTE: I	f answer is nor	ne, enter "N	ONE" on	the line	below.)		
			•	-	•	•					•
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	(check	(if applicable)	[]	There are	e more interests Permit/Varianc	to be listed e Attachme	and Par. 2 nt to Par. 2	2 is cont 2" form	inued on	a	

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App	lication No.(s):	
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	SPECIAL PERMIT/VARIANCE AFFIDAVIT	J
	DATE: <u>05/20/14</u> (enter date affidavit is notarized)	•
	(enter date affidavit is notarized)	124444
3.	That within the twelve-month period prior to the public hearing of this application, no member County Board of Zoning Appeals, Planning Commission, or any member of his or her immedirectly or by way of partnership in which any of them is a partner, employee, agent, or attorpartner of any of them, or through a corporation in which any of them is an officer, director, attorney or holds 10% or more of the outstanding bonds or shares of stock of a particular class business or financial relationship, other than any ordinary depositor or customer relationship establishment, public utility, or bank, including any gift or donation having a value of more to or in the aggregate, with any of those listed in Par. 1 above.	diate household, either ney, or through a employee, agent, or ss, has, or has had any with or by a retail
	EXCEPT AS FOLLOWS: (NOTE: If answer is none, enter "NONE" on line below.)	
	None	
	(NOTE: Business or financial relationships of the type described in this paragraph that ari this application and before each public hearing must be disclosed prior to the pub 4 below.)	
	(check if applicable) [ ] There are more disclosures to be listed and Par. 3 is continued or "Special Permit/Variance Attachment to Par. 3" form.	ı a
1.	That the information contained in this affidavit is complete, that all partnerships, corpo owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASE the land have been listed and broken down, and that prior to each and every public hea will reexamine this affidavit and provide any changed or supplemental information, inc financial relationships of the type described in Paragraph 3 above, that arise on or after application.	R, or LESSEE* of ring on this matter, I luding business or
VIT)	NESS the following signature:	<del></del>
٠	(check one) [] Applicant's Authorized Ag	ent
	Maritza Lopez-Brizuela (type or print first name, middle initial, last name, and title of	signee)
ubsc	cribed and sworn to before me this 2011 day of MA 2014, in the State	Comm. of

My commission expires: 3/3/10/15

WILLIAM A. PAZ
NOTARY PUBLIC
REGISTRATION # 358426
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MARCH 31, 2015

Notary Public

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Attorney/Agent, Contr	application are to be disclosed. Multiple relation act Purchaser/Lessee, Applicant/Title Owner of the parcel (s) for each owner(s) in the Relation.	er, etc. For a multiparcel application,
NAME (enter first name, middle initial, and ast name)	ADDRESS (enter number, street, city, state, and zip code)	RELATIONSHIP(S) (enter applicable relationships listed in BOLD above)
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		RECEIVED Department of Planning & Zoning
		MAY 2 0 2014
·		Zoning Evaluation Division
	•	249
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eck if applicable) [ ]	There are more relationships to be listed and on a "Special Permit/Variance Attachme	
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